Express Mail Label No. EV228890982US

Please type a plus sign (+) inside this box		+
---	---------	---

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number			
Filing Date	Filed Herewith		
First Named Inventor	James C. Stebnicki et al.		
Title	Composite Article Having Therm		
Group Art Unit			
Examiner Name	·		
Attorney Docket Number	790063.94485		

I hereby appoint:		[[[[]]]] [[] [] [] [] [] [
Practitioners at 0	Customer Number 26710			
OR	Justomer Number	267-10		
Practitioner(s) na	med below:	Place Cuedole Baldode Label here		
	Name	Registration Number		
	<u> </u>			
as mv/our attornev(s) or	agent(s) to prosecute the application ide	entified above, and to transact all		
	States Patent and Trademark Office conn			
Please change the corre	spondence address for the above-identif	ied application to:		
. —	ed Customer Number.			
OR				
Practitioners at Cus	stomer Number			
Firm or				
Individual Name		<u> </u>		
Address				
Address	· ·	· · · · · · · · · · · · · · · · · · ·		
City	l s	tate Zip		
Country				
Telephone	F	ax		
I am the:				
✓ Applicant/Invented	or.			
Assignee of reco	ord of the entire interest. See 37 CFR 3.7	1. · ·		
	37 CFR 3.73(b) is enclosed. (Form PTC			
SIGNATURE of Applicant or Assignee of Record				
James	- 1-			
Name				
Signature				
Date //22 July 03				
NOTE: Signatures of all the inver forms if more than one signature	tors or assignees of record of the entire interest or is required, see below.	their representative(s) are required. Submit multiple		
	ms are submitted.			

Burden Hour Statement: This form is estimated to take 3 minutes to complete, Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	Filed Herewith
First Named Inventor	James C. Stebnicki et al.
Title	Composite Article Having Thermo
Group Art Unit	
Examiner Name	
Attorney Docket Number	790063.94485

I hereby appoint:	99	[
Practitioners at 0	Customer Number 26710	Place	CUSTOME Bar Code Label here	
Practitioner(s) na	med below:	,	TENT TRADEMARK OFFICE	
	Name .	Registratio	n Number	
<u> </u>		<u> </u>		
				
[
	r agent(s) to prosecute the application id		d to transact all	
	States Patent and Trademark Office con			
	espondence address for the above-ident	ified application to	·	
OR	ned Customer Number.			
Practitioners at Cus	stomer Number		1	
OR		· <u>L-</u>		
Firm or	Y.			
Individual Name Address				
Address				
City		State	Zip	
Country				
Telephone		Fax		
I am the:				
✓ Applicant/Inventor	or.			
		7.4		
	ord of the entire interest. See 37 CFR 3." r 37 CFR 3.73(b) is enclosed. (Form PT			
SIGNATURE of Applicant or Assignee of Record				
Thoma	s R. Buchholz			
Name	The Business of the state of th	·		
Signature Thomas Outly				
Date	7-22-2003			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
	rms are submitted.			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION FOR UTILITY OR

790063.94485

PTO/SB/01 (10-01)
Approved for use through 10/31/2002.
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

DESIGN		First Named Inve	First Named Inventor James C. Stebnicki et al.			
PATENT APPLICATION		COI	COMPLETE IF KNOWN			
(37 CFR 1.63)		Application Numb	oer			
Declaration Declaration	Filing Date	Filed H	erewith			
Submitted OR with Initial		Group Art Unit				
Filing	(37 ČFR 1.16 (e)) required)	Examiner Name				
As a below named inventor, I he	reby declare that:					
My residence, mailing address, an	d citizenship are as stated	below next to my name).			
I believe I am the original and first entitled:	inventor of the subject ma	itter which is claimed an	d for which a pa	tent is sought on the invention		
Composite Article I	Having Thermoplastic	Elastomer Region	On Thermor	plastic Substrate		
	·	:				
			* .			
		· .				
	(Title of the	Invention)	-			
the specification of which						
is attached hereto			*			
OR						
was filed on (MM/DD/YYYY)	70 12 10	as United Sta	tes Application I	Number or PCT International		
Application Number	and was am	ended on (MM/DD/YYY	Y)	(if applicable).		
	· · ·		···			
I hereby state that I have reviewed amended by any amendment spec	and understand the conte cifically referred to above.	ents of the above identifi	ied specification	, including the claims, as		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
·						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

	Customer Num or Bar Code La			OR	Correspondence address below
Name					
Address		2671	O		
Address		PATENT TRADEMA	RK OFFICE	· · · · · · · · · · · · · · · · · · ·	
City	·		State		ZIP
Country	T	elephone			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INV	ENTOR:		A peti	tion has been fil	led for this unsigned inventor
Given Name James C. (first and middle [jt.any])	Jailyes C. Failily Name Stephicki				
Inventor's Signature 22 JU 03				22 J/z 03	
Residence: City Glendale		State V	/1	Country	Citizenship
Mailing Address	 		. <u>.</u> .		
Mailing Address 926 W. Bender Ro	oad	·.		*	
City Glendale	State WI	<u></u> -	ZIP	53217	Country US
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor					
Given Name Thomas R. Family Name Buchholz or Surname					
Inventor's Thomas R Buellel Date 7-22.03					
Residence: City Grafton		State W	′I	Country	US Citizenship
Mailing Address					
200 West Lilac La	ne				
City Grafton	State WI		ZIP 53	3024	US
Additional inventors are being named	on thes	upplemental Addit	ional Inve	ntor(s) sheet(s) PT	O/SB/02A attached hereto.